,									Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10/715,808						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY				
TOTAL CLAIMS								RATE	FE	Ε	1	RATE	FEE		
FOR			NUMBER	RFILED	NUM	NUMBER EXTRA			EE 385	5.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			1 7 minus 20=		· Ø			X\$ 9=			OR	X\$18=			
INDEPENDENT CLAIMS			<u> </u>	ninus 3 =	ja			X43=			OR	X86=			
MULTIPLE DEPENDENT CLAIM PRESENT							+145=			OR	+290=				
* If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL			OR	TOTAL			
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALI	L ENTI		OR	OTHER SMALL			
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	EST BER JUSLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI- TIONAL FEE		
	Total	. 17	Minus	-26	ラ <u></u>	=		X\$ 9=			OR	X\$18=			
AME	Independent	* 7	Minus	1 *** 3				X43=			OR	X86=			
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		7	OR	+290=			
								TOTA	- 6			TOTAL			
(Column 1) (Column 2) (Column 3)									Ē <u>!</u>		O. 1	ADDIT. FEE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ST BER USLY	PRESENT EXTRA		RATE	ADE TION FEE	AL		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	17.0		=		X\$ 9=		\Box_{a}	OR	X\$18=			
	Independent	*	Minus	***		=	r	X43=	1	٦,	OR	X86=			
	FIRST PRESE	十	114E-	1		1	. 200								
							L	+145= TOTAL	.		DR	+290= TOTAL	•		
		Al	DDIT. FEE		_J°	DR A	DDIT. FEE								
MEN		(Column 1) CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA	ſ	RATE	ADD TION	AL	ſ	RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		= .	r	X\$ 9=		7	R	X\$18=			
	Independent		Minus	***		B	. F	X43=		-1	.	X86=			
	IRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	-	\dashv °	R				
- 11	• If the entry in column 1 is less than the entry in column 2, write "0" in column 3									_ °	R	+290=			
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								<u>'</u>	—⁴·		TOTAL DDIT. FEE			
T	he "Highest Num	ber Previously Paid	For" (Total or	Independen	t) is th	highest number	found	d in the ap	propriate	box in	i colu	mn 1.			